

2162

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**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

		Application Number	09/925,397
		Filing Date	August 9, 2001
		First Named Inventor	Yuan-Chi Chang
		Art Unit	2162
		Examiner Name	Fred I. Ehichioya
Total Number of Pages in This Submission	11	Attorney Docket Number	YOR920010287 (8728-514)

ENCLOSURES (Check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance communication to Technology Center (TC)
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	1. Change of Correspondence Address
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	2. Return Postcard
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Eric M. Parham, Reg. No. 45,747, F.Chau & Associates, LLC
Signature	
Date	April 13, 2005

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Typed or printed name	Susan A. Guarascio	
Signature		Date 4-13-05

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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In re application of: Yuan-Chi Chang

Serial No.: 09/925,397

Group: Art Unit 2162

Filed: August 9, 2001

Examiner: Fred I. Ehichioya

For: CONCEPT-BASED SYSTEM FOR REPRESENTING AND PROCESSING MULTIMEDIA OBJECTS
WITH ARBITRARY CONSTRAINTS

Mail Stop Amendment

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT TRANSMITTAL FORM

Sir:

Transmitted herewith is an amendment in the above-identified application.

- [] Small entity status of this application under 37 C.F.R. § 1.9 and 1.27 has been established by a verified statement previously submitted.
- [] A verified statement to establish small entity under 37 C.F.R. § 1.9 and 1.27 is enclosed.
- [X] No additional fee is required.
The fee has been calculated as shown below:

(Col. 1)	(Col. 2)	(Col. 3) SMALL ENTITY	OTHER THAN SMALL ENTITY
CLAIMS			
REMAINING AFTER AMENDMENT	HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	ADDIT. RATE FEE OR RATE FEE
TOTAL INDEP.	20 3	MINUS 20 MINUS 3	= 0 X \$25 = 0 X \$100
			X \$ 50 = \$ X \$ 200 = \$
<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM		X \$180	X \$ 360 = \$
			TOTAL \$ <u>ADDIT. FEE</u> <u>\$0</u>

- * If the entry in Co. 1 is less than entry in Col. 2, write "0" in Col. 3.
- ** If the "Highest No. Previously Paid for" IN THIS SPACE is less than 20, enter "20".
- *** If the "Highest No. Previously Paid For" IN THIS SPACE is less than 3, enter "3". The Highest No. Previously Paid For" (Total or indep.) is the highest number found in the appropriate box in Col. 1 of a prior amendment or the number of claims originally filed.

[] Please charge Deposit Account No. 50-0510/IBM (Yorktown Heights) in the amount of \$ _____. Two (2) copies of this sheet are enclosed.

[X] Please charge any deficiency as well as any other fee(s) which may become due under 37 C.F.R. § 1.16 and/or 1.17 at any time during the pendency of this application, or credit any overpayment of such fee(s) to Deposit Account No. 50-0510/IBM. Also, in the event any extensions of time for responding are required for the pending application(s), please treat this paper as a petition to extend the time as required and charge Deposit Account No. 50-0510/IBM therefor. TWO (2) COPIES OF THIS SHEET ARE ENCLOSED.

Respectfully submitted,

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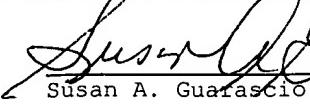

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Attorney for Applicant

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Dated:


April 13, 2005


Susan A. Guarascio

